

Sensory loss essay sample



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Identify methods for raising awareness of sensory loss:

* A working description of deafblindness that has been accepted over many years, is that persons are regarded as deafblind if their combined sight and hearing impairment cause difficulties with communication. It can be found in all age groups including children but the greatest is in older people. * Having a sight and hearing loss sometimes called dual sensory impaired leads to difficulties in communicating, mobility and impaired people. * Deaf blindness can be due to several causes, such as Ushers Syndrome, Rubella (German measles) and problems caused by premature births.

* Deafblind UK report that there are about 24, 000 people in the UK who are deaf blind; some are totally deaf and totally blind, other deaf blind people have some hearing and vision. These figures do not take into account the large number of older people who are losing both their sight and hearing. So the number of people with a combined sight and hearing loss could well be as high as 250, 000. There is a lack of awareness of the needs of people with dual sensory loss among the general public, but also within the medical profession and among public service providers. There appears to be no primary method of communication for deafblind people. Therefore services need to be tailored to the communication need of the individual.

“ Up to 50% of sight loss can be avoided if detected early enough” (RNIB & Age UK)

Five common causes of sight loss are:

* Age related macular degeneration / ARMD and AMD central vision while side vision remains, Most common sight loss in the UK, AMD occurs when the delicate cells of the macula become damaged and stop working. Wet AMD which can happen quickly but can respond to treatment if caught in early stages, Dry AMD which develops slowly and causes gradual loss of central vision can not be medically treated.

* Diabetic retinopathy / Can affect the eye in several ways. Most serious are the changes it causes to the retinal blood vessels known as diabetic retinopathy. This happens when diabetes causes the blood vessels in the eye to bulge, leak fluid and blood. This can have a serious affect on vision if left untreated,

* Glaucoma / This covers a group of conditions where the optic nerve is damaged at the point where it leaves the eye. This can cause what they call tunnel vision which may not be noticed until considerable damage to the person's side vision has been done. In some the damage is caused by raised eye pressure, this occurs when the aqueous fluid doesn't drain away properly. Also by a weakness in the optic nerve. Glaucoma can be treated medically using eye drops, drugs and laser treatment or operations, although any damage already caused cant be repaired,

* Cataract / Very common especially in the over 60s, Age related cataract is most common worldwild. Cataract symptoms include blurry or cloudy sight, dazzeled by light and fading colour vision. Its not a layer of skin that grows over the eye but a cloudy lens which can be replaced with a plastic lens called an intraocular lens implant.

* Refractive error / Refractive errors are short sightedness (myopia), long sightedness (hypermetropia) and presbyopia need for reading glasses. Can be corrected using spectacles or contact lens.

It is possible to have more than one condition and for it to be more or less severe. Getting older is one of the biggest risk factors for developing eye conditions which cause sight loss. Some older people will just put any of these conditions down to old age and not do anything about them but regular eye tests are the best way to detect any of the eye conditions. Over 60's receive a free eye test on the NHS and can get support with the cost of glasses if they receive the Guarantee part of Pension Credit. Another cause of sight loss is through having a Stroke. The most common is called Hemianopia. Caused by damage to the visual part of the brain. Hemianopia causes loss of sight in one side of the visual field, meaning the person would lose all the right or left side of their vision in both eyes. There is no treatment for this but may slightly improve overtime.

How to Identify Sight loss in Service Users:

A new service user to your company you can ask them about their sight do they wear glasses? or have they been diagnosed conditions or any self reported sight loss.

Although it may be difficult to notice if someone is experiencing difficulties with their sight and they may not want to admit it but some of the signs could be:

- * Walking slowly and appearing worried about falling
- * Appearing less confident or very quiet in social situations * Feeling for things even though they appear to be looking at them * Not happy to read or write in front of you
- * Not recognising people instantly - especially if you have not spoken immediately. * Difficulty in bright light low light or both
- * Have changed how they read, watch TV. drive, walk or engage in hobbies * Unable to locate food on a plate
- * Constantly bumping into things, shuffle their feet or steps hesitantly. * Complains that the lighting is inadequate for reading and other activities. * Have less clear writing than before
- * Difficulty identifying faces or objects
- * Over fill their drinking glass when pouring themselves a drink.
- * Remembering whether these apply or not that you need to recommend that people aged over 60 have a full eye examination as sight can change quite rapidly.

Dementia can cause sight loss especially in the over 60. s. This causes problems for day to day living, mobility, wellbeing and communication.

Dementia combined with sight loss can lead to:

- * Profound disorientation and isolation
- * Increased risk of falls
- * Difficulties moving between light and dark
- * More visual mistakes
- * Less Independence

- * Misperception and misidentification
- * Increased worry for carer's and relatives

Practical things you can do to improve people's quality of life and independence, such as effective lighting & design, making sure the environment makes the most of sight and light. Supporting people to wear appropriate spectacles. Having the same carers to provide continuity to help getting to know them well.

Vision plays a direct role in stabilizing balance. With sight problems the person has a higher risk of trip hazards indoors and outdoors. Perception changes and the depth of a step might mean you don't put your foot down properly.

- * When doing a risk assessment on falls risk ask about vision
- * If the client has a history of falls advise them to tell their GP and also to have a sight test
- * Make vision a part of any health education programme related to falls and home safety

The Equality Act became law on the 1st October 2010. You now need to review policies and practices to make sure they comply with the Act. Also considering the activities we provide, the way people are transported for instance how they can be made more accessible.

Suggestions to carer's family or the service user themselves on how to make their environment safer:

- * Large Clocks and are at eye level
- * Furniture to stay in same place, if left out of place can cause hazards

Suggest that colour contrast in will help detect what room they are in, also doors can be painted different colours. * Activities like large print puzzles, quizzes that read out rather than filled out. Audio books. * Good lighting helps to prevent trips or falls

* Any printed communication sent to the client should be in large print * Recommend magnifiers RNIB sell magnifiers up to 6 x magnification. * Have plates that contrast with table cloth eg: white plates and dark green table cloth. * Created by Jackie Wade Different shape condiments round for salt square for pepper. * A talking digital set top box called Smart Talk providing navigation in an audio format * Radio RNIB's insight radio broadcasts on the internet, Sky channel 0188, freesat channel 777. Insight radio is Europe's first radio station for the blind or partially sighted people, offering everything from daily newspapers, movie reviews, TV, events and job guides.

When greeting a client user mention who you are and touch people gently on the arm to let them know where you are letting them know when you are moving away from them.

Sight loss and hearing loss – dual sensory loss:

Over half of all people over 60 having hearing loss, combined with the prevalence of sight loss, the likelihood is a high percentage of older people with both. Congenital deaf blindness is when you are born deaf blind.

When supporting older people who may have dual sensory loss, it's important not to put too great an emphasis on either audio or visual guides.

Clarity is the key in all communication. The charity Sense provide expert advice and information. www.sense.org.uk

A Person with Hearing Difficulties may:

- * Complain that others mumble or speak to quickly
- * Ask others to repeat what they've said
- * Ask others to speak louder
- * Repeat words to verify what's been said
- * Find it difficult to keep up conversation in noisy environments or in a group
- * Have difficulty understanding unfamiliar people or accents
- * Get tired in conversation because of the need to concentrate
- * Withdraw from situations where conversation is expected
- * Need TV or radio volume louder than is comfortable for others
- * Find it hard to hear on the telephone
- * Use a hearing aid or loop system

Remember many sensory disabilities can be overcome enough for individuals to manage reasonably well. It's society that causes them problems.

Reflecting back on when my mother had her stroke she lost her speech altogether but over the past 3 years has gradually retrained and manages to say some sentences really clear. For individuals with speech problems alternative methods of communication can be formed. For instance pictures, word cards or for those who are able to use a computer can all help with communication. For sight loss making sure there are no trip hazards and placing furniture in specific areas and by keeping the same layout will help the person be able to feel more comfortable in moving around by themselves. For those with hearing loss making sure that they are aware you

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are in the same room. Always face them when speaking to them, help carers to learn sign language. What ever the sensory loss there are many aids on the market which can be a big help to the individuals needs to enable them to live a normal day to day life independently.

To help people with sensory loss to be able to have an input on their own care plan helps to make them feel like they are being treated as an independent individual.

The care plan should include questions that are specific for those with sensory loss so they can be asked right from the beginning and then all the information can then be passed down to the team of carers that will be looking after them.

With the correct help we could look at increasing social activities, this would have benefited from communication. All should fit in with the company's polices and procedures such as meeting needs, outcome focused care and involving service users in decisions.

References:

RNIB and Age UK Booklet " Seeing it from their side" [2011 September)

Sense for deafblind people, " The elderly" <http://www.sense.org.uk> First published Mon 2nd July Updated 22nd march